



(Check all that apply.)

Change purpose(s) of use Add purpose(s) of use

STATE OF WASHINGTON APPLICATION FOR CHANGE/TRANSFER

JUL 1 3 2010

DEPARTMENT OF ECOLOGY - CENTRAL REGIONAL OFFICE

For filing with the Department of Ecology or with County Conservancy Boards

OF WATER RIGHT

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

C54-28583C

FOR OFFICE USE ONLY

CHANGE No. Chel-10-03 WRIA

☐ Add purpose(s) of use ☐ Change point(s) of diversion/withdrawal ☐ Add point(s) of diversion/withdrawal ☐ Change/transfer place of use ☐ Other (i.e. consolidation, intertie, trust water)	d	DATE ACCEPTED 18 10 BY 10 FEE \$ \(\lambda \text{(00)} \text{ REC'D} \) 18 10 CHECK No. \$\(\lambda \left(\text{(00)} \text{ O7-13-2010} \)		
Explain: no season identified. Request	Mary Street Street	ECY Coding: 001-002-WR		
March 15-June 1.		./		
IF MORE SPACE IS NEEDED, ATTACH ADD	L		R TYPE CLEARLY)	
1. Applicant Information: APPLICANT/BUSINESS NAME		PHONE NO.	FAX NO.	
James R. Cannon		(509) 682-6761	()	
ADDRESS		(000) 002-0701		
7940 Entiat River Road				
CITY		STATE	ZIP CODE	
Entiat		WA	98822	
		84 60 Miles 197		
CONTACT NAME (IF DIFFERENT FROM ABOVE)		PHONE NO.	FAX NO.	
Mary McCrea		(509) 996-4121		
ADDRESS				
P.O. Box 850		Lance		
CITY		STATE	ZIP CODE	
Winthrop		WA	98862	
2 Water Pight Information:				
2. Water Right Information: WATER RIGHT OR CLAIM NUMBER	RECORDED	NAME(S)		
S4-28583C	The second second second	ph N. Cannon and James R. Cannon		
DO YOU OWN THE RIGHT TO BE CHANGED? YES NO	Trandop	11 14. Gairrion and de	inco it. Camion	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: James Caowners of the water right. James Cannon is the of the appointment of James Cannon as Person application.	he Persona	al Representative of	the estate. A copy	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST I	FIVE (5) YEARS	S? YES NO		
Please attach copies of any documentation that derwas established. Also, if you have a water system papplication.				
CS4-2 34-28583 CWRIS	8583			
APP. NO PERMIT NO CEI	RT. NO	CERT. OF CHAI	NGE NO	

3. Point(s) of Diversion/Withdrawal:

-	-		4 .		
A.	Ex	10	*	m	M
M .		(I)	C.I	88	u

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Entiat River		SW	NE	33	26N	20E		

B. Proposed

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Frost protection	1.56 cfs	12.4	as needed
		4-219-214	

1.5Le

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Frost protection	700 gpm	12.4	March 15- June 1

5. Place of Use:

A. Existing

Alithin th		LI	EGAL DESC	RIPTION OF	LANDS WHERE WATER IS PRESI	ENTLY USED:	
vviumi un	ne W1/2	2 NE1/4;	NE1/4 N	IW1/4, ly	ring southwesterly of the	Entiat River;	
he NE1/	/4 SE1	/4 NW1/4	1: NW1/4	SE1/4,	lying west of the Entiat R	liver;	
all in Sec	ction 3	3, T. 26N	R. 20	E.W.M.		2 2 2 6	
<u> </u>		-,					
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
SW	NE	33	26N	20E	Chelan		35

<u>D. 110</u>	posed		LEON DE	COUNTION	OF LANDS WILEDE NEW LISE IS	PROPOSED.	
NIE 4 / 4 I	11.014.14				OF LANDS WHERE NEW USE IS	PROPOSED:	
	man and the state of the	south of		it River;			
NE1/4	NE1/4 S	SE1/4 NV	<i>V</i> 1/4;				
W1/2 N	E1/4;						
	and the second second	est of the	Entiat R	iver: and			
		1/4, west					
		., .,			V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		7 7	-				
			T				
1/4	1/4	SEC.	TWP.	RGE.	Chelan	PARCEL#	# OF ACRES

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map. Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER? ☑ YES ☐ NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): See Exhibit 1 to Attachment A. 6. Remarks and Other Relevant Information: Location of diversion: 1725 feet south and 2150 feet west from the northwest corner of Section Location of Well #1: 1800 feet west and 40 feet south of the east quarter corner of Section 33. Location of Well #2: 2657 feet west and 1032 feet south from the NE corner of Section 33. See Attachment A. IF FOR SEASONAL OR TEMPORARY, START DATE __/_ / ___ END DATE __/_/ Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request. Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. 7. Signatures: I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me. (Date) (Date) (Land Owner(s) of Existing Place of Use) (Date) IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE. WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): ☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE □ SECTION IS INCOMPLETE ☐ ADDITIONAL SIGNATURES REQUIRED □ OTHER/EXPLANATION:__

STAFF:

DATE: ___/__/_

James Cannon and the Estate of Randolp	oh Cannon.	
Attach a detailed map of your proposed chang of diversion/withdrawal, place of use and any please include a certified copy of the plat map	other features involve	should show existing and proposed point(s) ed with this application. If platted property,
Are there any ADDITIONAL WATER rights OR CLAIMS RELA		
6. Remarks and Other Relevant Inform		
Location of diversion: 1725 feet south and 33.	12150 feet west fro	om the northwest corner of Section
Location of Well #1: 1800 feet west and 4	0 feet south of the	east quarter corner of Section 33.
Location of Well #2:		
Location of Well #2.		
See Attachment A.		
IF FOR SEASONAL OR TEMPOKARY, START DATE/	/END DATE _	
Certain applications may incur a Real Estate E. of Revenue has requested notification of potent with a copy of this request.	A STATE OF THE STA	
Please contact the State Department of Revenue The address is: Department of Revenue, Real I		
7. Signatures:		
order to process my application, I am her Conservancy Board access to the above s	eby granting staff fro ite(s) for inspection a	best of my knowledge. I understand that in om the Department of Ecology or the County and monitoring purposes. If assisted in the ponsibility for the accuracy of the information
	0 0 6	6/24/10
(Applicant	o James R-Co	lunn (Date)
(Water Right Hole	der) James L. A	(Date)
(Land Owner(s) of Existing	Place of Use Jumb	Randoph A. Cauna
		S PROVIDED ON THE NEXT PAGE.
WE ARE RETURNING YOUR APPLICATIO	N FOR THE FOLLOW	ING REASON(S):
☐ APPLICATION FEE NOT ENCLOSED	☐ MAP NOT INCLU	JDED or INCOMPLETE
☐ ADDITIONAL SIGNATURES REQUIRED	SECTION	IS INCOMPLETE
OTHER/EXPLANATION:		
STAFF.	D/	ATE: / /